

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT/IN

10/543113

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
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6							56						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.			↓		↓		TOTAL IND.			↓		↓	
TOTAL DEP.			←		←		TOTAL DEP.			←		←	
TOTAL CLAIMS							TOTAL CLAIMS						

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FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
101							
102							
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148							
149							
150							
TOTAL IND.			↓	33	↓		
TOTAL DEP.			←	23	←		
TOTAL CLAIMS			20				

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
151							
152							
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198							
199							
200							
TOTAL IND.			↓		↓		
TOTAL DEP.			←		←		
TOTAL CLAIMS			20				